Readoption Review

Immunization of School Children 410 IAC 1-1

IC 20-34-4-2 (a) Every child residing in Indiana shall be immunized against: (1) diphtheria; (2) Pertussis (whooping cough); (3) tetanus; (4) measles; (5) rubella; (6) poliomyelitis; and (7) mumps. (b) Every child residing in Indiana who enters kindergarten or grade 1 shall be immunized against hepatitis b and chicken pox.

Description of Rule:

The Indiana State Department of Health shall adopt rules under IC 4-22-2 specifying the: (1) required immunizations; (2) child's age for administering each vaccine; (3) adequately immunizing doses; and (4) method of proof of immunity, IC 2-34-4-2(d). IC20-34-4-6 (a) not later than sixty (60) days after the enrollment of students for the first time and when additional immunizations are required by statute or rule, each school shall file a written report with the state department of health and the local health department having jurisdiction.

Readoption Analysis:

1) Is there a continued need for this rule?

IC20-34-4-6 (b) establishes the Indiana State Department of Health and local health department shall, for good cause shown that there exists a substantial threat to the health and safety of a student or the school community, be able to validate immunization reports by onsite reviews or examinations of nonidentifying immunization record data.

2) What is the nature of any complaints or comments received from the public, including small business, concerning the rule or the implementation of the rule by the agency?

Complaints from parents are few or non-existent. Most school children are current with immunizations by the time they reach kindergarten or first grade and need few immunizations to meet the school requirement. School staff in general are complaint understand the need for immunizations in controlling disease through vaccines.

3) Examine the complexity of the rule, including difficulties encountered by the agency in administering the rule and small businesses in complying with the rule.

Recent comments have been in understanding the need for documentation of religious objection and medical exemption of immunizations. Occasionally a school may question the agency's authority to review immunization data that is part of a student's record.

4) To what extent does the rule overlap, duplicate, or conflict with other federal, state, or local laws, rules, regulations, ordinances?

Schools mentioned in item # 3 (above) reference the Family Educational Rights & Privacy Act (FERPA) not prohibiting examination of a student's school record to validate immunization records.

5) When was the last time the rule was reviewed under this section or otherwise evaluated by the agency, and the degree to which technology, economic conditions, or other factors have changed in the area affected by this rule since that time?

This rule was reviewed in 2004 when the hepatitis B rule for 9th and 12th grades was adopted. In 2006, the rule was reviewed to determine inclusion of the Human Papillomavirus (HPV) vaccine as a school requirement for 6th grade girls. The HPV vaccine was not included as a school requirement; however, the information regarding the HPV must be made available to parents of students in 6th grade. The Indiana State Department of Health Immunization Program is currently reviewing the list of required school immunizations and may increase the list to include newer vaccines.